REQUEST TO PLACE NAME ON CITY OFFICER BALLOT (Charter Provision No. 79)

10: City Secretary for the City of College Stati	on, Texas
I, John P. Hichoz, do office of City Council, Place 4. and official ballot for this particular office in the nequalified voter of the State of Texas, and am and College Station, Texas for at least one (1) year. I city Council if elected.	ext City election, November 6, 2012. I am a I have been a bona fide resident of the City of
I reside at 1317 Angelina Ct., , P	recinct No. 31, College Station, Texas.
	Signature Michel
SUBSCRIBED AND SWORN TO BEFORE ME TERESA MCCLELLAN Notary Public - State of New York No. 01MC6085513 Qualified in Niegara County My Commission Expires Dec. 30, 2014	This 19 DAY OF JULY, 2012. Notary Public
SOLICITUD PARA ANADIR A L. PUESTOS DE FUNCIONA (Provisión del Es	RIOS DE LA CIUDAD
PARA: Secretario de la Ciudad de College Station	n, Texas
Yo,, por es cargo de, y p oficial para este cargo particular en las eleccione Reúno los requisitos necesarios para votar en el la confiable y de buena fe de la Ciudad de College St decalificado ni soy inclegible para servir en el Con	Estado de Texas, y soy y he sido un residente ation, Texas por lo meno un (1) año. No estoy
Resido en la dirección siguiente:, College Station, Texas.	, Distrito Electoral No.
	Firma
FIRMADO Y JURADO ANTE MI ESTE E	DÍA DE, 2012.

Notario Público

AW2-15, 7/2011 Prescribed by Secretary of State Sections 141.031, 143.004, 143.006, Texas Election Code JUL 23 2012 plm DECEIVED @ 1:58 am

All information is required to be provided unless indicated as optional.

APPLICATION FOR A PLACE ON THE CITY O	F Lol	ge State	ON TX	GENERAL	ELECT	ION BALLOT		
TO: City Secretary								
I request that my name be placed on the above-named official hallot as a candidate for the office indicated below.								
OFFICE SOUGHT Include any place number or other distinguishing number, if any.				INDICATE TERM				
City Council, Place 4 FULL NAME (First Middle, Last) PRINT NAME AS YOU				S FULL	. [UNEXPIRED		
FULL NAME (First, Middle, Last)					WANT IT TO APPEAR ON THE BALLOT			
John P. Nichols	JOHN N				HO	K-5		
PERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rural Rt.) MAILING ADDRESS (If different from residence address)								
1317 ANGELINA CT.	2		-					
College Station STATE TEXAS 7784	10	CITY	S	TATE		ZIÞ		
EMAIL ADDRESS (Optional) OCCUPATION (Do not) From mis	,	nk) DATE OF BIRTH VOTER REGISTRATION VUID NUMBER (if applicable) /0 /20/1941 /040594555						
TELEPHONE NUMBER (Include urea code) (Optional)								
OFFICE:	UN STATE IN			CITY IN DISTRICT OR PRECINCT' Yr(s) 31 yr(s)				
номе:	15	4 <u>3</u> yr(s) 10 mos		mos		mos		
If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan nor does it indicate a political, economic, social, or retigious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election.								
Before me, the undersigned authority, on this day personally appeared (name) John P. Nichols who being by me here and now duly swom, upon oath says: "I, (name) John P. Nichols, of Brazes								
defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under								
the Constitution and laws of this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other official action. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code.								
I further swear that the foregoing statements included in my application are in all things true and correct."								
X she him								
SIGNATURE OF CANDIDATE								
Sworn to and subscribed before me at Lauiston, NY, this the 19 day of JULY 30/2.								
Tellsa Mc Clellar Signature of Officer administering oath	<u>No</u> Tide	TARY of Officer admin	istoring oal	Notary	No. 01	- State of New York MC6085513		
					ulfled in	Niagara County Expires Dec. 30, 2014		
TO BE COMPLETED BY CITY SECRETARY:		n. 12	1.2	A		Mest		
(See Section 1.007)		Date Re	ccived	Sig	nature of C	City Secretary		